WE CLAIM:

- A method of stabilizing a fractured pelvis comprising
 securing a belt around a person's fractured pelvis, and
 automatically setting the belt at a tension level that has been predetermined to
 substantially reduce a fractured pelvis without excessive compression.
 - 2. The method of claim 1, wherein the setting step includes the step of operating a buckle device that automatically establishes an appropriate circumference for the belt when the tension on the belt is in the range of approximately 150 N to 250 N.
 - 3. The method of claim 2 further comprising the step of conducting x-ray analysis through the belt to acquire information about the fracture.
 - 4. The method of claim 2, wherein the securing step includes the step of securing the belt symmetrically by pulling on opposite end portions of the belt simultaneously, thereby stabilizing the fractured pelvis evenly.

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5. A method of securing a pelvic fixator comprising

temporarily reducing a fractured pelvis by tightening a belt device around a person's pelvis, and

securing a pelvic fixator while the belt is secured around the person's pelvis.

6. The method of claim 5 further comprising the step of

automatically setting an appropriate tension on the belt by providing a buckle that locks and maintains a circumference for the belt when the tension is in the range of approximately 150 N to 250 N.

7. A method of reducing a pelvic fracture comprising

applying circumferential external distributed pressure around a person's pelvis by securing a belt having a tension in the range of approximately 150 N to 250 N.

8. The method of claim 7 further comprising the step of transporting the person to a hospital.

9. A method of stabilizing a fractured pelvis in an emergency situation comprising

securing a sling member around a person's fractured pelvis, and

tightening a sling member by operating a buckle mechanism that exhibits a

5 hysteresis effect between the minimal force required to lock the buckle and the maximal force required to unlock the buckle.